

INDIVIDUAL TABLE OF BENEFITS

		Blue	Azure	Cobalt	Admiral	Royal	
		162,500,000 HUF	390,000,000 HUF	487,500,000 HUF	650,000,000 HUF	975,000,000 HUF	
Area of Coverage		Europe		Worldwide Excluding USA/ Worldwide			
No	INPATIENT & DAYCASE						Terms and Definitions
1	Hospital Costs (including accommodation)	In Full	In Full	In Full	In Full	In Full	<i>We will pay for hospital room and board costs for a standard single en-suite room including general nursing care.</i>
2	Parent Accommodation	In Full	In Full	In Full	In Full	In Full	<i>We will pay for the room and board costs of one parent staying in hospital with their child up to the age of 18 (if the child is a member receiving treatment that is covered under the Policy).</i>
3	Theatre Fees	In Full	In Full	In Full	In Full	In Full	<i>We will pay for the costs of the operating room, post-surgical recovery room and care, medicines, dressings and equipment used during surgery and immediately afterwards and general nursing care associated with the surgery.</i>
4	ICU/HDU (intensive care/ high dependency unit)	In Full	In Full	In Full	In Full	In Full	<i>We will pay for the medically necessary admission and/or transfer to a High Dependency Unit or Intensive Care Unit.</i>
5	Specialist Fees	In Full	In Full	In Full	In Full	In Full	<i>We will pay for the surgeon, anesthetist and assistant's fees both in surgery and immediately before or after surgery on the same day. We will pay for surgeon's consultations while admitted in hospital - either to discuss your surgery or for treatment related to a non-surgical stay, such as being admitted for pneumonia.</i>
6	Pathology, X-rays and diagnostics tests	In Full	In Full	In Full	In Full	In Full	<i>We will pay for the costs of tests used to diagnose or assess your condition. This includes pathology (such as blood tests), radiology (such as x-rays or ultrasounds) and diagnostic tests (such as (ECGs).</i>
7	Physio/Chiro/ Osteo/ Complementary therapists/ dietician and speech therapy	In Full	In Full	In Full	In Full	In Full	<i>We will pay for treatment provided by medical practitioners in order to aid recovery or restore function as part of the overall treatment plan whilst admitted to hospital.</i>
8	Chronic conditions	In Full	In Full	In Full	In Full	In Full	<i>We will pay for the costs of an admission to hospital for an acute flare up of a chronic condition that requires active medical treatment, for the period of that admission only.</i>

9	Rehabilitation	NA	In Full up to 15 days for each condition	In Full up to 30 days for each condition	In Full up to 30 days for each condition	In Full up to 30 days for each condition	<i>We will pay for In-Patient rehabilitation costs following surgery.</i>
10	Psychiatric	NA	NA	NA	In Full up to 30 days	In Full up to 60 days	<i>We will pay for room and board and the costs of treatment when admitted to a psychiatric hospital up to the limits specified while under the supervision of a consultant psychiatrist.</i>
11	Prosthetic Implants	In Full	In Full	In Full	In Full	In Full	<i>We will pay for prosthetic implants needed as part of your treatment.</i>
12	Prosthetic devices	NA	NA	NA	In Full	in Full	<i>We will pay towards the costs of any items, supplies or equipment used in the course of medical treatment or home care, such as orthopedic supports, crutches, wheelchairs, hearing aids or speaking aids.</i>
13	Palliative Care	NA	NA	NA	In Full up to 30 days	In Full up to 30 days	<i>We will pay toward the costs of palliative care (whether in a hospice or at home) if you have received a terminal diagnosis and can no longer receive active medical treatment leading towards your recovery.</i>
14	Home Nursing	In Full up to 10 days after hospitalisation	In Full up to 30 days after hospitalisation	In Full up to 30 days after hospitalisation	In Full up to 30 days after hospitalisation	In Full up to 30 days after hospitalisation	<i>We will pay for the costs of home nursing if you have been in hospital receiving treatment which was covered under this plan but only if it immediately follows discharge from hospital, you require active medical support, is managed by a qualified nurse and was prescribed by your treating specialist. We will not pay for social and domestic support. We will not pay for home nursing related to mental illness, psychiatric or psychological disorders.</i>
15	Cash benefit	15, 000 HUF per night up to 10 days	15, 000 HUF per night up to 10 days	15, 000 HUF per night	15, 000 HUF per night	15, 000 HUF per night	<i>We will pay a lump sum cash benefit per night you spend in the hospital where you are not charged for your admission (ie: at a public hospital)</i>
16	Congenital and hereditary conditions	In Full only up to 60 days after birth	In Full only up to 60 days after birth	In Full only up to 90 days after birth	In Full only up to 90 days after birth	In Full only up to 90 days after birth	<i>We will pay for the treatment of Congenital and/or hereditary conditions. By congenital we mean any abnormalities, deformities, diseases, illnesses or injuries present at birth whether diagnosed at the time or not. By hereditary we mean any abnormalities, deformities, diseases or illnesses present at birth that are only present because they have been passed down through your family.</i>
17	Cover Outside of Geographical Area	9, 750, 000 HUF up to 30 days	9, 750, 000 HUF up to 30 days	16, 250, 000 HUF	16, 250, 000 HUF	16, 250, 000 HUF	<i>Covered until stable for transfer or up to the cash limit supplied.</i>

	OUTPATIENT		3 900 000 HUF overall limit				
18	Outpatient Surgery	NA	In Full up to 20 visits	In Full	In Full	In Full	<i>We will pay for the costs of a surgical procedure performed as an out-patient under a local anesthetic.</i>
19	General Practitioner & Specialist Fees	NA		NA	In Full but up to 30 visits	In Full	<i>We will pay for consultations with your GP, Family Doctor or Specialist to diagnose and treat a medical condition or to arrange further medical treatment or as a follow up to treatment that has already taken place.</i>
20	Pathology/x-rays and diagnostic tests	NA		NA			<i>We will pay for the costs of tests used to diagnose or assess your condition. This includes pathology (such as blood tests), radiology (such as x-rays or ultrasounds) and diagnostic tests (such as (ECGs).</i>
21	Physiotherapy	NA		NA			<i>We will pay for physiotherapy costs referred by your GP, Family Doctor or Specialist and under the direction of a registered physiotherapist for the purposes of providing short term focused treatment to relieve pain or restore function.</i>
22	Drugs and dressings	NA		In Full			NA
23	Consultations with therapists & complementary therapists	NA	NA	NA			<i>We will pay for the costs of treatment provided by a registered therapist, such as an Occupational Therapist and Complementary Therapist (acupuncture, homeopathy, chiropractic treatment or osteopathy). We will not pay for sexual therapy.</i>
24	Chronic conditions	NA	In Full but only within 20 visit limit above	NA			<i>We will pay for the ongoing management of chronic conditions. We define chronic as a condition that does not respond to active medical treatment and requires ongoing management (for example diabetes, or back pain)</i>
25	Speech therapy	NA	NA	NA			<i>We will pay for speech therapy in order to restore speech following an accident or for a condition (ie: stroke), under the recommendation of your specialist. We will not pay for developmental delay or language disorders.</i>
26	Emergency Out-Patient treatment	NA	NA	NA (unless surgery as above benefit)		<i>We will pay for the costs of emergency out-patient treatment (ie: services provided in Accident and Emergency Room as an out-patient) up to the limits provided</i>	
27	Psychiatric	NA	NA	NA	In Full, up to 20 visits	In full, up to 30 visits	<i>We will pay for the consultation and associated costs for psychiatry, psychology or psychotherapy provided the overall treatment plan is under the referral of a practicing registered psychiatrist/ psychologist.</i>

	OTHER						
28	Cancer treatment	In Full only in-patient	In Full	In Full	In Full	In Full	<i>We will pay for fees specifically related to the treatment of Cancer, including hospitalization, radiotherapy, chemotherapy and associated consultations, drugs and tests.</i>
29	Transplant Services	81,250,000 HUF/ Lifetime (Organ Transplant) 8,125,000 HUF (Tissue Transplant)	81,250,000/ Lifetime (Organ Transplant) 8,125,000 HUF (Tissue Transplant)	In Full only in-patient	In Full only in-patient	In Full	<i>We will pay for the costs of any treatment directly related to the implantation of a replacement organ, including bone marrow transplants. We will also pay towards costs associated with transplant services as an out-patient related to a provided or forthcoming transplant, including for the avoidance of doubt anti-rejection medicines. We will not pay for the costs associated with locating a replacement organ or tissue, or any costs incurred for the removal of the organ or tissue from the donor, transportation costs of the organ or tissue and all associated administration costs.</i>
30	Advanced imaging	In Full	In Full	In Full	In Full	In Full	<i>We will pay for the costs of a CT, MRI or PET scan (or combination of these scans) when recommended by your Specialist.</i>
31	Maternity Care	NA	NA	In Full	In Full	In Full	<i>Maternity benefit is only available after 12 months of continuous cover. Cover includes hospital charges, obstetrician and midwife fees for normal childbirth, pre and post-natal care (immediately following childbirth) and up to seven days routine care for the baby. We will not pay for terminations of pregnancy, other than miscarriage, ectopic pregnancy and stillbirth. We will pay for elective C-section and Childbirth at home. Restricted to cover in Hungary</i>
32	Childbirth Allowance	NA	NA	97,500 HUF	97,500 HUF	115,000 HUF	<i>This benefit is only available after 12 months of continuous cover. We will pay a lump sum childbirth allowance per child in case of your childbirth if you are not charged for your admission (ie: at a public hospital).</i>
33	Complications of pregnancy	NA	NA	NA	In Full	In Full	<i>This benefit is only available after 12 months of continuous cover. We will pay for the costs of a Caesarian Section where medically necessary arising as a result of a complication, including conditions such as pre-eclampsia, threatened miscarriage, baby is in breech position or the life of the mother and/or baby is under threat.</i>
34	Newborn care	NA	NA	3,250,000 HUF	8,125,000 HUF	32,500,000 HUF	<i>We will pay for the costs of treatment for a newborn baby up to 30 days after the date of birth. Children can be added as a dependent onto their parent's policy within 30 days of birth with no exclusions (subject to the congenital benefit wording).</i>
35	Accidental dental	NA	NA	NA	NA	In Full	<i>We will pay towards treatment of damaged teeth following an accident. We will not pay for the repair of dental implants, crowns or dentures.</i>

ASSISTANCE							
36	Road Ambulance	In Full	In Full	In Full	In Full	In Full	<i>We will pay for the costs of a medically necessary road ambulance to either transfer you to hospital following an accident or from one hospital to another.</i>
37	Repatriation of Mortal Remains	NA	3,250,000 HUF	3,250,000 HUF	3,250,000 HUF	3,250,000 HUF	<i>We will pay towards the costs of repatriating your mortal remains in the event you die away from your home country/country of residence. We will make all necessary arrangements as required under international regulations.</i>
38	International Emergency Medical Evacuation <i>(subject to Our approval)</i>	NA	In Full	In Full	In Full	In Full	<i>In the event of an emergency whereby the local medical facilities are unsatisfactory and unable to provide the level of medical care you need we will pay to either evacuate you to the nearest medical centre or to repatriate you to your home country/country of residence. The most appropriate means of transport available locally will be used (ie. regular scheduled, charter airline, or a specially chartered air ambulance). We will arrange and pay the reasonable travel costs of one person to accompany the Insured Person; in addition, We will pay for that person's overnight accommodation up to 16,250 HUF each night for a maximum of 10 nights. We will arrange for Repatriation to your Home Country once fit to travel.</i>
PREVENTIVE TREATMENT							
39	Health Screening	NA	71,500 HUF	NA	In Full, up to 1 visit per year	In Full up to 1 visit per year	<i>We will pay towards an annual health screen up to the limit..</i>
40	Baby Wellness	NA	NA	NA	In Full up to 4 visits per year	In Full up to 4 visits per year	<i>We will pay towards 4 health checks per year up until your child reaches the age of 2 and then the annual limits will apply.</i>
41	Vaccinations	NA	NA	NA	In Full	In Full	<i>We pay towards medically necessary vaccinations and immunizations including travel vaccinations.</i>

OPTIONAL DENTAL

42	Preventive	NA	NA	812,500 HUF	812,500 HUF	812,500 HUF	<i>We will pay towards costs of preventative dental treatment after you have been covered for 6 months on this option. 0% copay for this. (ie: check-up, X-ray, scale and polish, mouth guard)</i>
43	Routine and Restorative						<i>We will pay towards costs of routine and restorative dental treatment after you have been covered for 6 months on this option. 20% copay for this. (ie: fillings, root canal treatment, crowns/bridge, implant, anesthesia)</i>
44	Orthodontic						<i>We will pay towards costs of orthodontic treatment up to the age of 18 after you have been covered for 2 years on this option. 50% copay for this. (ie: dental braces/retainers)</i>